

**UNITED STATES COURT OF APPEALS
FOR THE NINTH CIRCUIT**

Form 6. Representation Statement

Instructions for this form: <http://www.ca9.uscourts.gov/forms/form06instructions.pdf>

Appellant(s) (List *each* party filing the appeal, do not use “et al.” or other abbreviations.)

Name(s) of party/parties:

Legacy Health; Legacy Good Samaritan Hospital and Medical Center; Legacy Mount Hood Medical Center; Legacy Meridian Park Hospital dba Legacy Meridian Park Medical Center

Name(s) of counsel (if any):

Richard C. Hunt
Paula A. Barran
Wilson S. Jarrell

Address: 601 SW 2nd Avenue, Suite 2300, Portland, Oregon 97204

Telephone number(s): 503-228-0500

Email(s): pbarran@barran.com; rhunt@barran.com; wjarrell@barran.com

Is counsel registered for Electronic Filing in the 9th Circuit? ☒ Yes ☐ No

Appellee(s) (List only the names of parties and counsel who will oppose you on appeal. List separately represented parties separately.)

Name(s) of party/parties:

Val Hoyle; Duke Shepard; Oregon Bureau of Labor and Industries

Name(s) of counsel (if any):

Ellen Rosenblum
Brian Simmonds Marshall
Alex C. Jones

Address: 100 SW Market Street, Portland, Oregon 97201

Telephone number(s): 971-673-1880

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To list additional parties and/or counsel, use next page.

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Continued list of parties and counsel: *(attach additional pages as necessary)*

Appellants

Name(s) of party/parties:

Legacy Emanuel Hospital & Health Center dba Legacy Emanuel Medical Center

Name(s) of counsel (if any):

Richard C. Hunt; Paula A. Barran; Wilson S. Jarrell

Address: 601 SW 2nd Avenue, Suite 2300, Portland, Oregon 97204

Telephone number(s): 503-228-0500

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Is counsel registered for Electronic Filing in the 9th Circuit? ☒ Yes ☐ No

Appellees

Name(s) of party/parties:

Name(s) of counsel (if any):

Address:

Telephone number(s):

Email(s):

Name(s) of party/parties:

Name(s) of counsel (if any):

Address:

Telephone number(s):

Email(s):

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